

AIR FORCE DISCHARGE REVIEW BOARD HEARING RECORD

NAME OF SERVICE MEMBER (LAST, FIRST MIDDLE INITIAL) []		GRADE AB	AFSN/SSAN []			
TYPE GEN	PERSONAL APPEARANCE	X	RECORD REVIEW			
COUNSEL		ADDRESS AND OR ORGANIZATION OF COUNSEL				
YES	No	NAME OF COUNSEL AND OR ORGANIZATION				
	X					
MEMBER SITTING []		VOTE OF THE BOARD				
		HON	GEN	UOHC	OTHER	DENY
						X
						X
						X
						X
ISSUES	INDEX NUMBER	EXHIBITS SUBMITTED TO THE BOARD				
A94.05	A67.10	1	ORDER APPOINTING THE BOARD			
		2	APPLICATION FOR REVIEW OF DISCHARGE			
		3	LETTER OF NOTIFICATION			
		4	BRIEF OF PERSONNEL FILE			
			COUNSEL'S RELEASE TO THE BOARD			
			ADDITIONAL EXHIBITS SUBMITTED AT TIME OF PERSONAL APPEARANCE			
			TAPE RECORDING OF PERSONAL APPEARANCE HEARING			
HEARING DATE	CASE NUMBER					
15 Mar 2007	FD-2006-00435					
APPLICANT'S ISSUE AND THE BOARD'S DECISIONAL RATIONALE ARE DISCUSSED ON THE ATTACHED AIR FORCE DISCHARGE REVIEW BOARD DECISIONAL RATIONALE						
<p>Case heard in Washington, D.C.</p> <p>Advise applicant of the decision of the Board, the right to a personal appearance with/without counsel, and the right to submit an application to the AFBCMR.</p> <p>Names and votes will be made available to the applicant at the applicant's request.</p> <p>X- Upgrade to discharge to honorable, change the reason for discharge, and to change the reenlistment eligibility code are denied.</p> <div style="border: 1px dashed black; height: 40px; width: 100%;"></div>						
INDORSEMENT			DATE: 3/15/2007			
TO:		FROM:				
	SAF/MRBR 550 C STREET WEST, SUITE 40 RANDOLPH AFB, TX 78150-4742		SECRETARY OF THE AIR FORCE PERSONNEL COUNCIL AIR FORCE DISCHARGE REVIEW BOARD 1535 COMMAND DR. EE WING, 3RD FLOOR ANDREWS AFB, MD 20762-7002			

AIR FORCE DISCHARGE REVIEW BOARD DECISIONAL RATIONALE

CASE NUMBER

FD-2006-00435

GENERAL: The applicant appeals for upgrade of discharge to honorable, to change the reason and authority for the discharge, and to change the reenlistment code.

The applicant was offered a personal appearance before the Discharge Review Board (DRB) but declined to exercise this right.

The attached brief contains available pertinent data on the applicant and the factors leading to the discharge.

FINDINGS: Upgrade of discharge, change of reason and authority for discharge, and change of reenlistment code are denied.

The Board finds that neither the evidence of record nor that provided by the applicant substantiates an inequity or impropriety that would justify a change of discharge.

ISSUE: The applicant contends his discharge was inequitable because it was too harsh. The records indicated the applicant received three Article 15s for misconduct. The misconduct included making a false official statement about a check that was missing from another airman's checkbook, writing a check to himself using the same missing check and forging the other airman's signature to the check, failing to correctly process a bag of United States mail, and failing to perform the duties of Bay Orderly. The DRB opined that through these administrative actions, the applicant had ample opportunities to change his negative behavior. The Board concluded the misconduct was a significant departure from conduct expected of all military members. The characterization of the discharge received by the applicant was found to be appropriate.

CONCLUSIONS: The Discharge Review Board concludes that the discharge was consistent with the procedural and substantive requirements of the discharge regulation and was within the discretion of the discharge authority and that the applicant was provided full administrative due process.

In view of the foregoing findings the Board further concludes that there exists no legal or equitable basis for upgrade of discharge, thus the applicant's discharge should not be changed.

Attachment:
Examiner's Brief

DEPARTMENT OF THE AIR FORCE
AIR FORCE DISCHARGE REVIEW BOARD
ANDREWS AFB, MD

(Former AB) (HGH AMN)

1. **MATTER UNDER REVIEW:** Appl rec'd a GEN Disch fr USAF McGuire AFB, NJ on 15 Nov 01 UP AFI 36-3208, para 5.49 (Misconduct - Minor Disciplinary Infractions). Appeals for Honorable Discharge, to Change the RE Code, and Reason for Discharge.

2. **BACKGROUND:**

a. DOB: 5 May 82. Enlmt Age: 18 1/12. Disch Age: 19 6/12. Educ: HS DIPL. AFQT: N/A. A-32, E-52, G-62, M-33. PAFSC: 8M00 - Postal Apprentice. DAS: 29 Nov 00.

b. Prior Sv: (1) AFRes 15 Jun 00 - 04 Jul 00 (20 days) (Inactive).

3. **SERVICE UNDER REVIEW:**

a. Enlisted as AB 5 Jul 00 for 4 yrs. Svd: 01 Yrs 04 Mo 11 Das, all AMS.

b. Grade Status: AB - 2 Aug 01 (Article 15, 2 Aug 01)
Amn - 5 Jan 01

c. Time Lost: None.

d. Art 15's: (1) 10 Oct 01, Vacation, Rhein-Main AB, Germany - Article 92. You, who knew of your duties, on or about 9 Oct 01, were derelict in the performance of those duties in that you negligently failed to perform duties as Bay Orderly in the unit dormitory at 0730, as it was your duty to do. Restriction to Rhein-Main AB, Germany for 21 days. (No appeal) (No mitigation)

(2) 13 Sep 01, Vacation, Rhein-Main AB, Germany - Article 92. You, who knew of your duties at Rhein-Main AB, Germany, on or about 29 Aug 01, were derelict in the performance of those duties in that you willfully failed to correctly process a bag of U.S. mail, as it was your duty to do. Forfeiture of \$300.00 pay. (No appeal) (No mitigation)

(3) 2 Aug 01, Rhein-Main AB, Germany - Article 107. You did, on or about 26 Jun 01, with intent to deceive, make to TSgt [REDACTED] 469 ABG Security Forces, an official statement, to wit: that you did not know anything about the missing check number 1036 belonging to [REDACTED], which statement was totally false, and was then known by you to be so false. Article 123. You did, on or about 13 Apr 01, with

intent to defraud, utter a chertain check in the following words and figures, to wit: payable to [REDACTED], the signature to which said check number 1036 was, as you then well knew, was falsely made and which was used to the legal harm of [REDACTED], in that the check for two hundred fifty dollars was cashed without his knowledge. Reduction to AB. Suspended forfeiture of \$300.00 pay. Restriction to the limits of Rhein-Main AB, Germany to include the Medical Clinic and Gateway Gardens Housing Area for 21 days (suspended). Fourteen days extra duty. (No appeal) (No mitigation)

- e. Additional: Unknown.
- f. CM: None.
- g. Record of SV: None.
- h. Awards & Decs: AFTR, AFOSSTR.
- i. Stmt of Sv: TMS: (01) Yrs (05) Mos (01) Das
TAMS: (01) Yrs (04) Mos (11) Das

4. BASIS ADVANCED FOR REVIEW: Appln (DD Fm 293) dtd 30 Oct 06.
(Change Discharge to Honorable, and Change the RE Code, Reason for Discharge)

ISSUES ATTACHED TO BRIEF.

ATCH

- 1. Applicant's Issues.
- 2. DD Form 149.

08DEC06/ia

**APPLICATION FOR THE REVIEW OF DISCHARGE
FROM THE ARMED FORCES OF THE UNITED STATES**
(Please read instructions on Pages 3 and 4 BEFORE completing this application.)

*Form Approved
OMB No. 0704-0004
Expires Aug 31, 2006*

The public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Executive Services and Communications Directorate (0704-0004). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. **PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO THE APPROPRIATE ADDRESS ON BACK OF THIS PAGE.**

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 1553; E.O. 9397.
PRINCIPAL PURPOSE(S): To apply for a change in the characterization or reason for military discharge issued to an individual.
ROUTINE USE(S): None.
DISCLOSURE: Voluntary; however, failure to provide identifying information may impede processing of this application. The request for Social Security Number is strictly to assure proper identification of the individual and appropriate records.

1. APPLICANT DATA (The person whose discharge is to be reviewed). PLEASE PRINT OR TYPE INFORMATION.

a. BRANCH OF SERVICE (X one) ARMY MARINE CORPS NAVY AIR FORCE COAST GUARD

b. NAME (Last, First, Middle Initial) _____ **c. GRADE/RANK AT DISCHARGE** E-1 **d. SOCIAL SECURITY NUMBER** _____

2. DATE OF DISCHARGE OR SEPARATION (YYYYMMDD) (If date is more than 15 years ago, submit a DD Form 149) _____ **4. DISCHARGE CHARACTERIZATION RECEIVED (X one)**

<input type="checkbox"/> HONORABLE	5. BOARD ACTION REQUESTED (X one)
<input checked="" type="checkbox"/> GENERAL/UNDER HONORABLE CONDITIONS	
<input type="checkbox"/> UNDER OTHER THAN HONORABLE CONDITIONS	

3. UNIT AND LOCATION AT DISCHARGE OR SEPARATION Mc Guire AFB NJ

<input type="checkbox"/> BAD CONDUCT (Special court-martial only)	5. BOARD ACTION REQUESTED (X one)
<input type="checkbox"/> UNCHARACTERIZED	
<input type="checkbox"/> OTHER (Explain)	

6. ISSUES: WHY AN UPGRADE OR CHANGE IS REQUESTED AND JUSTIFICATION FOR THE REQUEST (Continue in Item 14. See instructions on Page 3.)
I request that my reentry code 2B on my DD-214 be change to one that may allow me to reenlist in the Navy, Coastguard or Army. At the time I did not know that 2B meant that I could not join any other service. I really don't think I deserved that code, I will like a second chance to serve, since being out of military has been my goal.

7. (X if applicable) AN APPLICATION WAS PREVIOUSLY SUBMITTED ON (YYYYMMDD) _____ AND THIS FORM IS SUBMITTED TO ADD ADDITIONAL ISSUES, JUSTIFICATION, OR EVIDENCE.

8. IN SUPPORT OF THIS APPLICATION, THE FOLLOWING ATTACHED DOCUMENTS ARE SUBMITTED AS EVIDENCE: (Continue in Item 17. If military documents or medical records are relevant to your case, please send copies.)

9. TYPE OF REVIEW REQUESTED (X one)

CONDUCT A RECORD REVIEW OF MY DISCHARGE BASED ON MY MILITARY PERSONNEL FILE AND ANY ADDITIONAL DOCUMENTATION SUBMITTED BY ME. I AND/OR (counsel/representative) WILL NOT APPEAR BEFORE THE BOARD.

I AND/OR (counsel/representative) WISH TO APPEAR AT A HEARING AT NO EXPENSE TO THE GOVERNMENT BEFORE THE BOARD IN THE WASHINGTON, D.C. METROPOLITAN AREA.

I AND/OR (counsel/representative) WISH TO APPEAR AT A HEARING AT NO EXPENSE TO THE GOVERNMENT BEFORE A TRAVELING PANEL CLOSEST TO (enter city and state) _____ (NOTE: The Navy Discharge Review Board does not have a traveling panel.)

10.a. COUNSEL/REPRESENTATIVE (if any) NAME (Last, First, Middle Initial) AND ADDRESS (See Item 10 of the instructions about counsel/representative.) _____

b. TELEPHONE NUMBER (Include Area Code) _____

c. E-MAIL _____

d. FAX NUMBER (Include Area Code) _____

11. APPLICANT MUST SIGN IN ITEM 13.a. BELOW. If the record in question is that of a deceased or incompetent person, LEGAL PROOF OF DEATH OR INCOMPETENCY MUST ACCOMPANY THE APPLICATION. If the application is signed by other than the applicant, indicate the name (print) _____ and relationship by marking a box below.

SPOUSE WIDOW WIDOWER NEXT OF KIN LEGAL REPRESENTATIVE OTHER (Specify) _____

12.a. CURRENT MAILING ADDRESS OF APPLICANT OR PERSON ABOVE (Forward notification of any change in address.) _____

b. TELEPHONE NUMBER (Include Area Code) _____

c. E-MAIL _____

d. FAX NUMBER (Include Area Code) _____

13. CERTIFICATION. I make the foregoing statements, as part of my claim, with full knowledge of the penalties involved for willfully making a false statement or claim. (U.S. Code, Title 18, Sections 287 and 1001, provide that an individual shall be fined under this title or imprisoned not more than 5 years, or both.)

CASE NUMBER
(Do not write in this space.)

a. SIGNATURE - REQUIRED (Applicant or person in Item 11 above) _____ **b. DATE SIGNED - REQUIRED (YYYYMMDD)** 20061127

FD 2006-00435